



## NOTICE OF PROPOSED RULE ADOPTION



Office of the Attorney General c/o Director of Division of	Specific Legal Authority authorizing promulgation of Rule: Miss. Code Ann. 99-41-1
Victim Compensation	Auto
P.O. Box 220	
Jackson, MS 39205 601-359-6766	Reference to Rules repealed, amended or suspended by the Rule: N/A
jkenn@ago.state.ms.us	Rule:
,	
Explanation of the Purpose of the Proposed Rule and the reason(s) for proposing the rule:	
These rules are filed pursuant to statutory dictates that the Division of Victim Compensation, Office of the Attorney General, comply with the MS Administrative Procedures Law	
Attorney General, comply with the MS A	diffinistrative Procedures Law
This rule is proposed as a Final Rule, and/	or a □ Temporary Rule (Check one or both boxers)
Persons may present their views on the proposed rule by addressing written comments to the agency at the above address. Persons making comments should include their name and address, as well as other contact information, and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.	
Oral Proceeding: (check one)	
☐ An oral proceeding is scheduled on this rule on the following date, time and place:	
If you wish to be heard and present evidence at the oral proceeding you must make a written request to the agency at the above address at least day(s) prior to the proceeding to be placed on the agenda. The request should include your name, address, telephone number as well as other contact information; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.  An oral proceeding is not scheduled on this rule. Where an oral proceeding is not scheduled, an	
oral proceeding will be held if a written request for an oral proceeding is submitted by a political subdivision, an agency or ten (10) persons. The written request should be submitted to the agency contact person at the above address within twenty (20) days after the filing of this notice of proposed rule adoption and should include the name, address and telephone number of the person(s) making the request; and if you are an agent or attorney, the name, address and telephone number of the party or parties you represent.	
Economic Impact Statement: (check one)	
The agency has determined that a	n economic impact statement is not required for this rule, or
☐ The concise summary of the econ	nomic impact statement required is attached.
The entire text of the Proposed Rule including the text of any rule being amended or changed is attached.	
Plen O' Ment	Proposed Effective Date of Rule: 12/26/06
Signature and Title of Person Submitting Rule for Filing	